

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF ILLINOIS
DIVISION

DOCKETED

MAR 02 2001

JUAN BROWN
(Name of the plaintiff or plaintiffs)
v.
clerk) James Tedesco
America Business Management + UNIVERSITY
of Chicago
(Name of the defendant or defendants)

01C 1468

CIVIL ACTION

JUDGE KENNELLY

NO. _____
(Case number will be supplied by the assignment)

MAGISTRATE JUDGE SCHENKIER

FILED-ED4
01 MAR -1 PM 1:29
U.S. DISTRICT COURT

COMPLAINT OF EMPLOYMENT DISCRIMINATION

1. This is an action for employment discrimination.

2. The plaintiff is Juan Brown of
the county of Cook in the state of Illinois.

3. The defendant is James Tedesco, who
resides at (street address) America Business Management
175 North Franklin Street
(city) Chicago (county) Cook (state) IL (ZIP) 60606
(Defendant's telephone number) (312) - 795-0112

UNIVERSITY of
CHICAGO
James & Tedesco
America Business Management

4) The plaintiff sought employment or was employed by the defendant at

(street address) 175 North Franklin
(city) Chicago (county) Cook (state) IL (ZIP code) 60606

5. The plaintiff [check one box]

- (a) ☐ was denied employment by the defendant.
(b) ☐ was hired and is still employed by the defendant.
(c) ☒ was employed but is no longer employed by the defendant.

6. The defendant discriminated against the plaintiff on or about, or beginning on or about,

(month) 09, (day) 01, (year) 2000.

7. (a) The plaintiff [check one box] ☐ has not filed a charge or charges against the defendant
☒ has
asserting the acts of discrimination indicated in this complaint with any of the following
government agencies:

- (i) ☒ the United States Equal Employment Opportunity Commission on or about
(month) 06 (day) 28 (year) 2000.
(ii) ☐ the Illinois Department of Human Rights on or about
(month) _____ (day) _____ (year) _____.

(b) If charges were filed with an agency indicated above, a copy of the charge is

attached.

☒ YES ☐ NO

It is the policy of both the Equal Employment Opportunity Commission and the Illinois Department of Human Rights to cross-file with the other agency all charges received. The plaintiff has no reason to believe that this policy was not followed in this case.

8. (a) ☐ the United States Equal Employment Opportunity Commission has not issued a *Notice of Right to Sue*.
- (b) ☒ the United States Equal Employment Opportunity Commission has issued a *Notice of Right to Sue*, which was received by the plaintiff on (month) 06 (day) 28 (year) 2000 a copy of which *Notice* is attached to this complaint.

9. The defendant discriminated against the plaintiff because of the plaintiff's [check all that apply]

- (a) ☐ Age (Age Discrimination Employment Act).
- (b) ☒ Color (Title VII of the Civil Rights Act of 1964 and 42 U.S.C. §1981).
- (c) ☐ Disability (Americans with Disabilities Act)
- (d) ☐ National Origin (Title VII of the Civil Rights Act of 1964 and 42 U.S.C. §1981).
- (e) ☒ Race (Title VII of the Civil Rights Act of 1964 and 42 U.S.C. §1981).
- (f) ☐ Religion (Title VII of the Civil Rights Act of 1964)
- (g) ☐ Sex (Title VII of the Civil Rights Act of 1964)

10. The plaintiff is suing the defendant, a state or local government agency, for discrimination on the basis of race, color, or national origin (42 U.S.C. §1983). ☒ YES ☐ NO

11. Jurisdiction over the statutory violation alleged is conferred as follows: over Title VII claims by 28 U.S.C. §1331, 28 U.S.C. §1343(a)(3), and 42 U.S.C. §2000e-5(f)(3); over 42 U.S.C. §1981 and §1983 by 42 U.S.C. §1988; over the A.D.E.A. by 42 U.S.C. §12117.

CHARGE OF DISCRIMINATION

This form is affected by the Privacy Act of 1974; See Privacy Act Statement by completing this form.

AGENCY CHARGE NUMBER
☐ FEPA
☒ EEOC 210A03764

Illinois Dept. of Human Rights and EEOC
 State or local Agency, if any

NAME (Indicate Mr., Ms., Mrs.) HOME TELEPHONE (Include Area Code)
 Mr. Juan Brown (773) 768-8571

STREET ADDRESS CITY, STATE AND ZIP CODE DATE OF BIRTH
 8637 S. Dante, Chicago, IL 60619

NAMED IS THE EMPLOYER, LABOR ORGANIZATION, EMPLOYMENT AGENCY APPRENTICESHIP COMMITTEE, STATE OR LOCAL GOVERNMENT AGENCY WHO DISCRIMINATED AGAINST ME (If more than one list below.)

NAME NUMBER OF EMPLOYEES, MEMBERS TELEPHONE (Include Area Code)
 AMERICAN BUILDING MAINTENANCE Cat D (501 +) (773) 702-0260

STREET ADDRESS CITY, STATE AND ZIP CODE COUNTY
 5811 S. Ellis, Chicago, IL 60637 031

NAME TELEPHONE NUMBER (Include Area Code)

STREET ADDRESS CITY, STATE AND ZIP CODE COUNTY

CAUSE OF DISCRIMINATION BASED ON (Check appropriate box(es)) DATE DISCRIMINATION TOOK PLACE
☒ RACE ☐ COLOR ☐ SEX ☐ RELIGION ☐ NATIONAL ORIGIN
☒ RETALIATION ☐ AGE ☐ DISABILITY ☐ OTHER (Specify)
 EARLIEST LATEST
 06/13/2000
☒ CONTINUING ACTION

THE PARTICULARS ARE (If additional space is needed, attach extra sheet(s)):

I was hired by Respondent as Janitor in June 1997. On or about May 10, 2000 I began working at Respondent's Hyde Park location. Since that time and continuing, I have been subjected to racial harassment by several crewmembers. I informed my Supervisor that I have been subjected to different terms and conditions of my employment (ordered by crewmembers to immediately relinquish equipment for their use, accused of theft, not assigned keys, and ordered to use a particular material locker instead of common-use equipment) and harassment because of my race. On June 13, 2000 I was subjected to a hostile environment and derogatory racial symbols (hangman's noose). Upper management is aware of this incident, however, responsible parties were not disciplined. Harassment by crewmembers continued. I was retaliated against in that I was assigned to another location with unfavorable working conditions.

I believe that I have been discriminated against because of my race, Black, and retaliated against for having complained of racial discrimination, in violation of Title VII of the Civil Rights Act of 1964, as amended.

RECEIVED EEOC

JUN 28 2000

☐ I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or telephone number and cooperate fully with them in the processing of my charge in accordance with their procedures.

I declare under penalty of perjury that the foregoing is true and correct.

NOTARY - (When necessary for State and Local Requirements)

I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.

SIGNATURE OF COMPLAINANT

SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE
 (Month, day and year)

Date 6-28-00

Charging Party (Signature)

EEOC FORM 5 (Rev. 06/99)

FILE COPY

12. The defendant [check all that apply]

- (a) ☐ failed to hire the plaintiff.
- (b) ☒ terminated the plaintiff's employment.
- (c) ☐ failed to promote the plaintiff.
- (d) ☐ failed to reasonably accommodate the plaintiff's religion.
- (e) ☐ failed to reasonably accommodate the plaintiff's disabilities.
- (f) ☒ other

(specify): _____

Because of Discrimination and
Racial Harassment

13. The facts supporting the plaintiff's claim of discrimination are as follows:

Harassment by several crewmembers
and Discriminated by my Supervisor.

14. [AGE DISCRIMINATION ONLY] Defendant knowingly, intentionally, and willfully discriminated against the plaintiff.

15. The plaintiff demands that the case be tried by a jury. ☒ YES ☐ NO

16. THEREFORE, the plaintiff asks that the court grant the following relief to the plaintiff [check all that apply]

- (a) ☐ Direct the defendant to hire the plaintiff.
- (b) ☐ Direct the defendant to re-employ the plaintiff.
- (c) ☐ Direct the defendant to promote the plaintiff.
- (d) ☐ Find that the defendant failed to reasonably accommodate the plaintiff's religion.
- (e) ☐ Find that the defendant failed to reasonably accommodate the plaintiff's disabilities.

(f) ☒ Direct the defendant to (specify): To Compensate, Juan Brown

for the Harrassment and

racial Discrimination &

Wrongfully dismissing, Mr. Juan Brown

(g) ☒

If available, grant the plaintiff appropriate injunctive relief, lost wages, liquidated/double damages, front pay, compensatory damages, punitive damages, prejudgment interest, post-judgment interest, and costs, including reasonable attorney fees and expert witness fees.

(h) ☐

Grant such other relief as the Court may find appropriate.

(Plaintiff's signature)

Juan Brown

(Plaintiff's name)

Juan Brown

(Plaintiff's street address)

439 Prairie Street

Calumet, IL 60489

(City) Calumet (State) IL (ZIP) 60489

(Plaintiff's telephone number)

(708) - 832 - 1261

JS 44
(Rev. 12/96)

CIVIL COVER SHEET

11C 1468

The JS-44 civil cover sheet and the information contained herein neither replace nor supplement the filing and service of pleadings or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for the use of the Clerk of Court for the purpose of initiating the civil docket sheet. (SEE INSTRUCTIONS ON THE REVERSE OF THE FORM.)

I. (a) PLAINTIFFS

SUAN BROWN
4301 PRAIRIE 2-S
CALUMET CITY, IL 60409
COOK

(b) COUNTY OF RESIDENCE OF FIRST LISTED PLAINTIFF
(EXCEPT IN U.S. PLAINTIFF CASES)

DEFENDANTS

JAMES TEDESCO
AMERICAN BUILDING MANAGEMENT
175 N. FRANKLIN ST. STE. 400 CHICAGO, IL 60601
UNIVERSITY OF CHICAGO
COUNTY OF RESIDENCE OF FIRST LISTED DEFENDANT
(IN U.S. PLAINTIFF CASES ONLY)

NOTE: IN LAND CONDEMNATION CASES, USE THE LOCATION OF THE TRACT OF LAND INVOLVED.

(c) ATTORNEYS (FIRM NAME, ADDRESS, AND TELEPHONE NUMBER)

ATTORNEYS (IF KNOWN)

JUDGE KENNELLY
MAGISTRATE JUDGE SCHENKIER

II. BASIS OF JURISDICTION

(PLACE AN "X" IN ONE BOX ONLY)

- ☒ 1 U.S. Government Plaintiff
☐ 2 U.S. Government Defendant
☒ 3 Federal Question (U.S. Government Not a Party)
☐ 4 Diversity (Indicate Citizenship of Parties in Item III)

III. CITIZENSHIP OF PRINCIPAL PARTIES

(For Diversity Cases Only)

(PLACE AN "X" IN ONE BOX FOR PLAINTIFF AND ONE BOX FOR DEFENDANT)

- | | PTF | DEF | | PTF | DEF |
|---|----------------------------|----------------------------|---|----------------------------|----------------------------|
| Citizen of This State | <input type="checkbox"/> 1 | <input type="checkbox"/> 1 | Incorporated or Principal Place of Business in This State | <input type="checkbox"/> 4 | <input type="checkbox"/> 4 |
| Citizen of Another State | <input type="checkbox"/> 2 | <input type="checkbox"/> 2 | Incorporated and Principal Place of Business in Another State | <input type="checkbox"/> 5 | <input type="checkbox"/> 5 |
| Citizen or Subject of a Foreign Country | <input type="checkbox"/> 3 | <input type="checkbox"/> 3 | Foreign Nation | <input type="checkbox"/> 6 | <input type="checkbox"/> 6 |

IV. ORIGIN

(PLACE AN "X" IN ONE BOX ONLY)

- ☒ 1 Original Proceeding
☐ 2 Removed from State Court
☐ 3 Remanded from Appellate Court
☐ 4 Reinstated or Reopened
☐ 5 Transferred from another district (specify)
☐ 6 Multidistrict Litigation
☐ 7 Appeal to District Judge from Magistrate Judgment

V. NATURE OF SUIT

(PLACE AN "X" IN ONE BOX ONLY)

| CONTRACT | TORTS | | FORFEITURE/PENALTY | BANKRUPTCY | OTHER STATUTES |
|--|--|--|--|---|---|
| <input type="checkbox"/> 110 Insurance <input type="checkbox"/> 120 Marine <input type="checkbox"/> 130 Miller Act <input type="checkbox"/> 140 Negotiable Instrument <input type="checkbox"/> 150 Recovery of Overpayment & Enforcement of Judgment <input type="checkbox"/> 151 Medicare Act <input type="checkbox"/> 152 Recovery of Defaulted Student Loans (Excl. Veterans) <input type="checkbox"/> 153 Recovery of Overpayment of Veteran's Benefits <input type="checkbox"/> 160 Stockholders' Suits <input type="checkbox"/> 190 Other Contract <input type="checkbox"/> 195 Contract Product Liability | PERSONAL INJURY <input type="checkbox"/> 310 Airplane <input type="checkbox"/> 315 Airplane Product Liability <input type="checkbox"/> 320 Assault, Libel & Slander <input type="checkbox"/> 330 Federal Employers' Liability <input type="checkbox"/> 340 Marine <input type="checkbox"/> 345 Marine Product Liability <input type="checkbox"/> 350 Motor Vehicle <input type="checkbox"/> 355 Motor Vehicle Product Liability <input type="checkbox"/> 360 Other Personal Injury | PERSONAL INJURY <input type="checkbox"/> 362 Personal Injury - Med. Malpractice <input type="checkbox"/> 365 Personal Injury - Product Liability <input type="checkbox"/> 368 Asbestos Personal Injury Product Liability PERSONAL PROPERTY <input type="checkbox"/> 370 Other Fraud <input type="checkbox"/> 371 Truth in Lending <input type="checkbox"/> 380 Other Personal Property Damage <input type="checkbox"/> 385 Property Damage Product Liability | <input type="checkbox"/> 610 Agriculture <input type="checkbox"/> 620 Other Food & Drug <input type="checkbox"/> 625 Drug Related Seizure of Property 21 USC 881 <input type="checkbox"/> 630 Liquor Laws <input type="checkbox"/> 640 R.R. & Truck <input type="checkbox"/> 650 Airline Regs. <input type="checkbox"/> 660 Occupational Safety/Health <input type="checkbox"/> 690 Other | <input type="checkbox"/> 422 Appeal 28 USC 158 <input type="checkbox"/> 423 Withdrawal 28 USC 157 PROPERTY RIGHTS <input type="checkbox"/> 820 Copyrights <input type="checkbox"/> 830 Patent <input type="checkbox"/> 840 Trademark | <input type="checkbox"/> 400 State Reapportionment <input type="checkbox"/> 410 Antitrust <input type="checkbox"/> 430 Banks and Banking <input type="checkbox"/> 450 Commerce/ICC Rates/etc <input type="checkbox"/> 460 Deportation <input type="checkbox"/> 470 Racketeer Influenced and Corrupt Organizations <input type="checkbox"/> 810 Selective Service <input type="checkbox"/> 850 Securities/Commodities/Exchange <input type="checkbox"/> 875 Customer Challenge 12 USC 3410 <input type="checkbox"/> 891 Agricultural Acts <input type="checkbox"/> 892 Economic Stabilization Act <input type="checkbox"/> 893 Environmental Matters <input type="checkbox"/> 894 Energy Allocation Act <input type="checkbox"/> 895 Freedom of Information Act <input type="checkbox"/> 900 Appeal of Fee Determination Under Equal Access to Justice Act <input type="checkbox"/> 950 Constitutionality of State Statutes <input type="checkbox"/> 990 Other Statutory Actions |
| REAL PROPERTY <input type="checkbox"/> 210 Land Condemnation <input type="checkbox"/> 220 Foreclosure <input type="checkbox"/> 230 Rent Lease & Ejectment <input type="checkbox"/> 240 Torts to Land <input type="checkbox"/> 245 Tort Product Liability <input type="checkbox"/> 290 All Other Real Property | CIVIL RIGHTS <input type="checkbox"/> 441 Voting <input checked="" type="checkbox"/> 442 Employment <input type="checkbox"/> 443 Housing/Accommodations <input type="checkbox"/> 444 Welfare <input type="checkbox"/> 440 Other Civil Rights | PRISONER PETITIONS <input type="checkbox"/> 510 Motions to Vacate Sentence HABEAS CORPUS: <input type="checkbox"/> 530 General <input type="checkbox"/> 535 Death Penalty <input type="checkbox"/> 540 Mandamus & Other <input type="checkbox"/> 550 Civil Rights <input type="checkbox"/> 555 Prison Condition | LABOR <input type="checkbox"/> 710 Fair Labor Standards Act <input type="checkbox"/> 720 Labor/Mgmt. Relations <input type="checkbox"/> 730 Labor/Mgmt. Reporting & Disclosure Act <input type="checkbox"/> 740 Railway Labor Act <input type="checkbox"/> 790 Other Labor Litigation <input type="checkbox"/> 791 Empl. Ret. Inc. Security Act | SOCIAL SECURITY <input type="checkbox"/> 861 HIA (1395ff) <input type="checkbox"/> 862 Black Lung (923) <input type="checkbox"/> 863 DIWC/DIWW (405(g)) <input type="checkbox"/> 864 SSID Title XVI <input type="checkbox"/> 865 RSI (405(g)) FEDERAL TAX SUITS <input type="checkbox"/> 870 Taxes (U.S. Plaintiff or Defendant) <input type="checkbox"/> 871 IRS - Third Party 26 USC 7609 | |

VI. CAUSE OF ACTION

(CITE THE U.S. CIVIL STATUTE UNDER WHICH YOU ARE FILING AND WRITE BRIEF STATEMENT OF CAUSE. DO NOT CITE JURISDICTIONAL STATUTES UNLESS DIVERSITY.)

HARRASSMENT & DISCRIMINATION

VII. REQUESTED IN COMPLAINT

CHECK IF THIS IS A CLASS ACTION UNDER F.R.C.P. 23 ☒

DEMAND \$

CHECK YES only if demanded in complaint

JURY DEMAND:

☐ YES ☐ NO

VIII. This case

☒ is not a refiling of a previously dismissed action.

☐ is a refiling of case number _____, previously dismissed by Judge _____

DATE

3/1/01

SIGNATURE OF ATTORNEY OF RECORD

Suan Brown

UNITED STATES DISTRICT COURT

DOCKETED
MAR 02 2001

1-2

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF ILLINOISIn the Matter of *JOAN BROWN***DOCKETED**

MAR 02 2001

*AMERICAN BUILDING MAINTENANCE
UNIVERSITY OF CHICAGO*

Case Number:

APPEARANCES ARE HEREBY FILED BY THE UNDERSIGNED AS ATTORNEY(S) FOR:

01C 1468

JUDGE KENNELLY

MAGISTRATE JUDGE SCHENKIER

| | | | |
|---|---|---|------------|
| (A) | | (B) | |
| SIGNATURE <i>Joan Brown</i> | | SIGNATURE <i>[Signature]</i> | |
| NAME <i>JOAN BROWN</i> | | NAME | |
| FIRM | | FIRM | |
| STREET ADDRESS <i>439 PRAIRIE 2-5</i> | | STREET ADDRESS | |
| CITY/STATE/ZIP <i>CHICAGO, IL 60409</i> | | CITY/STATE/ZIP | |
| TELEPHONE NUMBER <i>(708) 832-1261</i> | FAX NUMBER | TELEPHONE NUMBER | FAX NUMBER |
| E-MAIL ADDRESS | | E-MAIL ADDRESS | |
| IDENTIFICATION NUMBER (SEE ITEM 4 ON REVERSE) | | IDENTIFICATION NUMBER (SEE ITEM 4 ON REVERSE) | |
| MEMBER OF TRIAL BAR? YES <input type="checkbox"/> NO <input type="checkbox"/> | MEMBER OF TRIAL BAR? YES <input type="checkbox"/> NO <input type="checkbox"/> | | |
| TRIAL ATTORNEY? YES <input type="checkbox"/> NO <input type="checkbox"/> | TRIAL ATTORNEY? YES <input type="checkbox"/> NO <input type="checkbox"/> | | |
| DESIGNATED AS LOCAL COUNSEL? YES <input type="checkbox"/> NO <input type="checkbox"/> | | DESIGNATED AS LOCAL COUNSEL? YES <input type="checkbox"/> NO <input type="checkbox"/> | |
| (C) | | (D) | |
| SIGNATURE | | SIGNATURE | |
| NAME | | NAME | |
| FIRM | | FIRM | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY/STATE/ZIP | | CITY/STATE/ZIP | |
| TELEPHONE NUMBER | FAX NUMBER | TELEPHONE NUMBER | FAX NUMBER |
| E-MAIL ADDRESS | | E-MAIL ADDRESS | |
| IDENTIFICATION NUMBER (SEE ITEM 4 ON REVERSE) | | IDENTIFICATION NUMBER (SEE ITEM 4 ON REVERSE) <i>1-3</i> | |
| MEMBER OF TRIAL BAR? YES <input type="checkbox"/> NO <input type="checkbox"/> | MEMBER OF TRIAL BAR? YES <input type="checkbox"/> NO <input type="checkbox"/> | | |
| TRIAL ATTORNEY? YES <input type="checkbox"/> NO <input type="checkbox"/> | TRIAL ATTORNEY? YES <input type="checkbox"/> NO <input type="checkbox"/> | | |
| DESIGNATED AS LOCAL COUNSEL? YES <input type="checkbox"/> NO <input type="checkbox"/> | | DESIGNATED AS LOCAL COUNSEL? YES <input type="checkbox"/> NO <input type="checkbox"/> | |